

R381-100- 7: PERSONNEL

Purpose

This section provides rules and information about all individuals who work or volunteer at a child care facility.

General Information

Working days refers to the days the Child Care Licensing Program is open for business.

- (1) The center must have a director who is at least 21 years of age.

Rationale / Explanation

The director of a center plays a pivotal role in ensuring the day-to-day smooth functioning of the facility within the framework of appropriate child development principles. The well-being of the children in the facility depends largely upon the knowledge, skills, and dependable presence of a director who is able to respond to long-term and immediate needs, and who is able to engage staff in appropriate decision making that affects their day to day practices with children. *CFOC 3rd Ed. pg.11 Standard 1.3.1.1.*

Enforcement

Always Level 2 Noncompliance.

Assessment

Two directors may be listed on a center's license, as long as both **individuals** meet director qualifications.

During any on-site inspection, when there is not a qualified director, the Licensing Specialist will issue a finding for noncompliance.

- (1) The center must have a director who is at least 21 years of age, who has completed the Center Director Training class offered by the Department, and who has one of the following educational credentials:
 - (a) an associates, bachelors, or graduate degree from an accredited college and successful completion of at least 12 semester credit hours of early childhood development courses;
 - (b) valid proof of a level 8, 9, or 10 Utah Early Childhood Career Ladder certification issued by the Utah Office of Child Care or the Utah Child Care Professional Development Institute;
 - (c) a currently valid national certification such as a Certified Childcare Professional (CCP) issued by the National Child Care Association, a Child Development Associate (CDA) issued by the Council for Early Childhood Professional Recognition, or other credential that the licensee demonstrates as equivalent to the Department; or
 - (d) a currently valid National Administrator Credential (NAC) as approved by the Department, plus one of the following:
 - (i) valid proof of successful completion of 12 semester credit hours of early childhood development courses from an accredited college; or
 - (ii) valid proof of completion of the following six Utah Early Childhood Career Ladder courses, or their equivalent, as approved by the Utah Child Care Professional Development Institute : Child Development Ages and Stages, Learning in the Early Years, A Great Place for Kids, Strong and Smart, Learning to Get Along, and Advanced Child Development.
 - (e) Any bachelors or higher college degree, and valid proof of completion of the following six Utah Early Childhood Career Ladder courses, or their equivalent, as approved by the Utah Child Care Professional Development Institute: Child Development Ages and Stages, Learning in the Early Years, A Great Place for Kids, Strong and Smart, Learning to Get Along, and Advanced Child Development.

Rationale / Explanation

College level coursework has been shown to have a measurable, positive effect on quality child care, whereas experience by itself has not. *CFOC 3rd Ed. pg. 11 Standard 1.3.1.1.*

Enforcement

Level 2 Noncompliance except as described below.

Level 3 Noncompliance if directors have expired NAC, CDA, or CCP credentials.

Assessment

Successful completion of a college course means a passing grade of C or better.

Continuing Education Units (CEU) are different from college credits. In order to count as college credit, a course must appear on an official transcript from an accredited college or university.

There are online courses, such as CARE courses and classes from NACCRRA, that meet the requirements of this rule. The CARE courses can be found at www.carecourses.com. The local Care About Childcare at <http://careaboutchildcare.utah.gov> has additional information.

The following CARE courses are equivalent to the required CAC (formerly CCR&R) classes:

- Understanding Children or Principles of Child Development and Learning is equivalent to Child Development Ages and Learning in the Early Years.
- Learning Centers is equivalent to A Great Place for Kids.
- Child Development and Guidance is equivalent to Learning to Get Along and Advanced Child Development.
- Many Ways to Learn is equivalent to Strong and Smart.

A course is only considered completed if documentation of a certificate or transcript is provided. A

Montessori Credential is considered equivalent to a CDA or CCP.

CDA certificates must be current in order to be used as director qualifications.

Information for National Administrator Credential (NAC) classes may be found at <http://www.utahchildcare.org/>.

NICCM out of Arizona with Bradley Smith as the contact is an approved NAC course.

(2) Any new Center director must complete the Department's Center Director Training Class no later than 60 working days after assuming director duties.

Enforcement

Always Level 2 Noncompliance.

(3) All caregivers shall be at least 18 years of age.

Rationale / Explanation

Eighteen years is the age of legal consent. The purpose of this rule is to ensure that caregivers have the maturity necessary to meet the responsibilities of independently caring for a group of children. *CFOC, 3rd Ed. pg. 13 Standard 1.3.2.3.*

The American Academy of Pediatrics and the American Public Health Association recommend that lead caregivers be at least 21 years of age. *CFOC, 3rd Ed. pg. 12, Standard 1.3.2.2.*

Enforcement

Always Level 2 Noncompliance.

- (4) All assistant caregivers shall be at least 16 years of age, and shall work under the immediate supervision of a caregiver who is at least 18 years of age.
- (5) Assistant caregivers may be included in caregiver to child ratios, but shall not be left unsupervised with children.

Rationale / Explanation

The American Academy of Pediatrics and the American Public Health Association recommend that assistant caregivers be at least 18 years of age, and that volunteers and students be at least 16 years of age, but never be left alone with children or counted in the ratios. *CFOC, 3rd Ed. pg. 13 Standard 1.3.2.3.*

Eighteen is the age of legal consent. Research in brain development and functioning in teenagers indicates that teenagers' responses to situations are more emotional and impulsive, and show less reasoned judgment, than adult responses. For more information on this research, see:

- <http://www.nimh.nih.gov/Publicat/teenbrain.cfm>
- <http://www.pbs.org/wgbh/pages/frontline/shows/teenbrain/>

Enforcement

Always Level 2 Noncompliance.

Assessment

Caregivers under the age of eighteen may not be left unsupervised with a child(ren) at any time.

- (6) Assistant caregivers shall meet all of the caregiver requirements under this rule, except the caregiver age requirement of 18 years.

Rationale / Explanation

Except for the age requirement, assistant caregivers must meet the caregiver requirements for background screening, orientation training, annual training, and all other requirements for caregivers contained in the rules.

Enforcement

The Noncompliance Level depends on the caregiver requirement(s) with which the assistant caregiver failed to comply.

- (7) A volunteer may be included in the provider to child ratio only if the volunteer meets all of the caregiver requirements of this rule.

Rationale / Explanation

A volunteer is anyone who provides care to a child but does not receive direct or indirect compensation for doing so.

Children through age 12 and children with disabilities through age 18 are considered children in care by statute. Children age 13 through age 15 who help out in a classroom of younger children are considered to be volunteers, but are not included in caregiver ratios because they do not meet age requirements. They are required to meet the other volunteer requirements including a department background screening.

- (8) Whenever there are children at the center, there shall be at least one caregiver present who can demonstrate the English literacy skills needed to care for children and respond to emergencies.

Rationale / Explanation

Caregivers need English literacy skills in order to perform essential functions to protect children's health and safety, such as reading warning labels on chemicals, instructions on medications and medication authorization forms, emergency information on child enrollment forms, information on a child's health assessment, instructions on a fire extinguisher, etc.

English skills are also important in dealing with poison control and emergency response (911).

Enforcement

Level 1 Noncompliance if there is an emergency and a caregiver is unable to get the needed emergency assistance.

Level 2 Noncompliance otherwise.

Assessment

If there is a question about whether or not the caregivers who are present have the required English literacy skills, the Licensing Specialist may ask the caregivers to read some written material printed in English.

- (9) Each new caregiver, and volunteers who count in the caregiver to child ratio, shall receive at least 2.5 hours of pre-service training prior to assuming caregiving duties. Pre-service training shall be documented in the caregiver's file and shall include the following topics:
- (a) job description and duties;
 - (b) the Department-approved center's written policies and procedures;
 - (c) the Department-approved center's emergency and disaster plan;
 - (d) the current child care licensing rules found in Sections R430-100-11 through 24;
 - (e) introduction and orientation to the children assigned to the caregiver;
 - (f) a review of the information in the health assessment for each child in their assigned group;
 - (g) signs and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements for witnessing or suspicion of abuse, neglect, and exploitation;
 - (h) recognizing the signs of homelessness and available assistance;
 - (i) prevention of shaken baby syndrome and abusive head trauma, and coping with crying babies; and
 - (j) prevention of sudden infant death syndrome and use of safe sleeping practices.

Rationale / Explanation

The purpose of this rule is to ensure that all new staff members receive basic training for the work they will be doing and understand their duties and responsibilities. Because of frequent staff turnover in the child care field, it is essential that the health and safety of children in care are protected by not leaving new caregivers alone with children until they have completed basic orientation training. *CFOC 3rd Ed. pgs. 21-22 Standard 1.4.2.1.*

A yearly review of the center's written policies encourages administrators to keep this information current. *CFOC 3rd Ed. pg. 349 Standard 9.2.1.2.*

Enforcement

Level 2 Noncompliance if a new caregiver does not have orientation training or documentation of orientation training, in:

- the center's emergency and disaster plan
- the child care licensing rules for:
 - supervision and ratios – Section 11
 - injury prevention – Section 12
 - parent notification and child security – Section 13
 - child health – Section 14
 - infection control – Section 16
 - medications – Section 17
 - napping – Section 18
 - child discipline – Section 19
 - transportation – Section 21
 - diapering – Section 23
 - infant and toddler care – Section 24
- introduction and orientation to the children assigned to the caregiver
- a review of the information in the health assessment for each child in their assigned group
- procedures for releasing children to authorized individuals only
- proper clean up of body fluids
- signs and symptoms of child abuse and neglect, and legal reporting requirements for witnessing or suspicion of abuse, neglect, and exploitation
- obtaining assistance in emergencies, as specified in the center's emergency and disaster plan
- SIDS, coping with crying babies, and Shaken Baby Syndrome, if the center cares for infants

Level 3 Noncompliance if a new caregiver does not have orientation training, or documentation of orientation training, in:

- job description and duties
- the center's written policies and procedures
- the child care licensing rules for:
 - child nutrition – Section 15
 - activities – Section 20
 - animals – Section 22

Assessment

In order to meet the requirement for training in Sections 11-24 of the Licensing Rules, the training must cover the actual rules, not just be on the topic of the rule section.

Providers may have up to 5 working days after a new caregiver begins working with children to complete the required orientation training, provided they are never left alone with children until all of the required orientation training is completed.

All employees and volunteer, including those listed below, are required to complete orientation training:

- Transporters and cooks
- 16 and 17-year-old assistant caregivers
- Program guests, such as someone presenting a puppet show, dance lessons, reading stories or making a presentation, if the guest will ever be left unsupervised with the children.
- High school or college students who work with the children as part of a class.
- 13 to 15-year-old volunteer helpers.

High school or college students who only observe children at a center, but do not interact with the children, are not required to complete orientation training.

If a person transfers within a corporation and the policies are the same, he/she is not required to repeat the orientation training.

- (10) The following individuals shall complete a minimum of 20 hours of child care training each year, based on the center's license date:
- (a) the director;
 - (b) the assistant director, if the center has one;
 - (c) all caregivers;
 - (d) all substitutes who work an average of 10 hours a week or more, as averaged over any three month period; and
 - (e) all volunteers that the provider includes in the provider to child ratio.
- (11) Documentation of annual training shall be kept in each caregiver's file, and shall include the name of the training organization, the date, the training topic, and the total hours or minutes of training.
- (12) Caregivers who begin employment partway through the license year shall complete a proportionate number of training hours based on the number of months worked prior to the center's relicense date.

Rationale / Explanation

The American Academy of Pediatrics and the American Public Health Association recommend that all directors and caregivers complete 30 clock hours each year of ongoing training. Research has demonstrated that the training and education of the caregiver has a direct impact on the quality of care children receive. Caregivers who are better trained are better able to prevent, recognize, and correct health and safety problems. Caregivers are also more likely to avoid abusive discipline practices if they are well-informed about effective, non-abusive methods for managing children's behaviors.

CFOC 3rd Ed. pg. 14-16 Standards 1.3.2.4, 1.3.2.5, 1.3.2.6, pgs 26-27 Standard 1.4.4.1, pg. 30

Standard 1.4.5.2, pgs. 81-82 Standard 2.4.1.1, pgs. 123-124 Standard 3.4.4.1, pg. 351 Standard 9.2.1.6

Accurate and complete training records are needed to track staff training and monitor compliance with this rule.

CFOC 3rd Ed. pg. 393 Standard 9.4.3.3.

Enforcement

Level 2 Noncompliance if caregivers don't have the required hours of training.

Level 3 Noncompliance if caregivers have documentation of the required hours of training, but the training documentation does not include all of the information required by rule (name of the training organization, the date, the training topic, and the total hours or minutes of training).

Assessment

Training hours are calculated from the license start date to license end date. The annual training is not required to be completed at the Annual Inspection. However, a license is not renewed until training hours have been completed.

Van drivers, cooks, secretaries, receptionists, bookkeepers, custodians, and maintenance workers do not need to complete annual training, unless they help out in a classroom an average of 10 hours per week or more, as averaged over a three month period.

Drivers are not required to complete annual training when all they do is transport children, even if they count in ratios during transportation.

Training conducted at in-house staff meetings may be counted toward the total required training hours. However, only the training portion of the staff meeting during which training was given. Times spent covering business matters, such as assigning tasks and work schedules may not be counted towards training hours.

In-house training, including training from a guest presenter, must be documented. Any documentation format is acceptable as long as it includes the required information.

College and high school students may count clock time spent in child development courses as hours of annual training. One semester credit hour is considered to be equivalent to 15 clock hours of training. One quarter credit hour of credit is considered to be equivalent to 10 clock hours of training.

Since volunteering in a classroom is not considered child care related training, it does not count towards the required annual training hours.

Time spent researching and planning curriculum can be counted for non-face to face training hours. Time spent preparing (making copies, cutting, etc.) and presenting curriculum to the children does not count towards training hours.

The trainer may count the time spent training caregivers as non face-to-face hours and also count the topics covered. An employee who is on a leave of absence from the facility, for instance on maternity leave, is still required to complete all required training hours and topics.

Caregivers who only work a portion of the licensing year must complete an average of 1 hour and 40 minutes of training for each full month of employment. Half of this training must be face-to-face training. Time spent in orientation training during a new employee's first year of employment can count toward his/her hours of required annual training for the first year. The table below may be used to calculate the required number of training hours.

| Annual Training Hours Required for Employees Hired Part-Way Through the Center's License Year | | |
|--|--|--|
| When Hired | Required Hours Needed at Re-licensure | Required Face to Face Hours |
| 1 Month before Re-licensure | 1 hour 40 Minutes | 50 minutes |
| 2 Months before Re-licensure | 3 hours 20 minutes | 1 hour 40 minutes |
| 3 Months before Re-licensure | 5 hours | 2 hours 30 minutes |
| 4 Months before Re-licensure | 6 hours 40 minutes | 3 hours 20 minutes |
| 5 Months before Re-licensure | 8 hours 20 minutes | 4 hours 10 minutes |
| 6 Months before Re-licensure | 10 hours | 5 hours |
| 7 Months before Re-licensure | 11 hours 40 minutes | 5 hours 50 minutes |
| 8 Months before Re-licensure | 13 hours 20 minutes | 6 hours 40 minutes |
| 9 Months before Re-licensure | 15 hours | 7 hours 30 minutes |
| 10 Months before Re-licensure | 16 hours 40 minutes | 8 hours 20 minutes |
| 11 Months before Re-licensure | 18 hours 20 minutes | 9 hours 10 minutes |
| 12 Months before Re-licensure | 20 hours | 10 hours |

The following trainings and classes do not count towards training hours for Child Care Licensing:

- stress management
- yoga.
- technical assistance from Child Care Licensing staff
- language classes.
- origami training
- dance classes for children
- adult anger management classes

(13) Annual training hours shall include the following topics:

- (a) the current child care licensing rules found in Sections R430-100-11 through 24;
- (b) a review of the Department-approved center's written policies and procedures and emergency and disaster plans, including any updates;
- (c) signs and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements for witnessing or suspicion of abuse, neglect, and exploitation;
- (d) principles of child growth and development, including development of the brain;
- (e) positive guidance;
- (f) prevention of shaken baby syndrome and abusive head trauma, and coping with crying babies;
- (g) prevention of sudden infant death syndrome and use of safe sleeping practices; and
- (h) recognizing the signs of homelessness and available assistance;

Rationale / Explanation

Staff training in child development and/or early childhood education is related to positive outcomes for children. This training enables the staff to provide children with a variety of learning and social experiences appropriate to the age of the child. *CFOC 3rd Ed. Standard 1.3.2.3 p. 13*

A yearly review of the center's written policies encourages administrators to keep this information current. *CFOC 3rd Ed. pg.349 Standard 9.2.1.2.*

Enforcement

Always Level 3 Noncompliance.

Assessment

In order to meet the requirement for training in Sections 11-24 of the Licensing Rules, the training must cover the actual rules, not just be on the topic of the rule section.

Watching reality TV and talk shows is not considered to be child care training.

In order to meet the requirement for training of Sections 11-24 of the Licensing Rules, the specific licensing rules rather than the general topic must be reviewed. For example, a nutrition class may count toward the required 20 hours of training, but unless the child care nutrition rules are reviewed, it does not meet training of Section 15 of the Licensing Rules.

The Care About Childcare (CAC) class "Medication Administration" covers Section 17 of the rules. Refer to <http://careaboutchildcare.utah.gov> for other courses from CAC that cover licensing rules and topics.

Only staff that are ever with infants and/or toddlers are required to have training in Preventing Shaken Baby Syndrome, Coping with Crying Babies and Preventing Sudden Infant Death Syndrome.

(14) A minimum of 10 hours of the required annual in-service training shall be face-to-face instruction.

Rationale / Explanation

Face-to-face training is important because class members have an opportunity to engage in discussion with one another and ask questions about the class content.

Enforcement

Always Level 2 Noncompliance.

Assessment

To count as face-to-face training, there must be a certificate or other documentation from any outside agency delivering the training, such as CAC, workshops, or conferences. If there is no certificate or other documentation, the training may count towards the required training hours, but not as face-to-face training.

Examples of face-to-face training include time spent in center staff meeting trainings, conferences, and workshops. College and high school students may count clock time spent in child development courses as face-to-face training if the class is in-person (as opposed to online or take-home packets).

Real time, interactive webinars may count as face-to-face training as long as the caregiver provides documentation of attendance.

Documented hours from an outside source, such as a conference, can be counted as face-to-face training if a certificate is provided.

Parent/child relationship classes may count towards annual training.

A high school student may count actual clock hours spent in a child development classes as face-to-face training. Any time spent doing homework for the class can count as non-face-to-face training hours.

Because they are considered therapeutic and not child care related, adult anger management classes do not count towards annual training hours.